

**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted With Initial Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	58027-014000
First Named Inventor	Judy Dering
COMPLETE IF KNOWN	
Application Number	
Filing Date	
Art. Unit	
Examiner Name	

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

CONSTRAINTS-BASED ANALYSIS OF GENE EXPRESSION DATA

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) [redacted]

as United States Application Number or PCT International

Application Number [redacted]

and was amended on (MM/DD/YYYY) [redacted]

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? Yes	Certified Copy Attached? No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete. Including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.
If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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DECLARATION — Utility or D sign Patent Application

Direct all correspondence to:	<input checked="" type="checkbox"/> Customer Number:	33717	<input type="checkbox"/> OR <input type="checkbox"/> Correspondence address below
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Name			
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Address			
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City	State	ZIP
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Country	Telephone	Fax
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor
---------------------------------	---

Given Name (first and middle [if any]) Judy	Family Name or Surname Dering
--	----------------------------------

Date

Inventor's Signature <i>Judy Dering</i>	Date
--	------

Residence: City Westlake Village	State California	Country United States	Citizenship
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Mailing Address 841 Rim Crest Circle	ZIP	Country	United States
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91361

City Westlake Village	State California	ZIP	Country
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NAME OF SECOND INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor
--------------------------	---

Given Name (first and middle [if any]) Cindy A.	Family Name or Surname Wilson
--	----------------------------------

Date

Inventor's Signature	Date
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Residence: City Santa Monica	State California	Country United States	Citizenship
---------------------------------	---------------------	--------------------------	-------------

Mailing Address 1118 Tenth Street, Apartment 3	ZIP	Country	United States
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90403

City Santa Monica	State California	ZIP	Country
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<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the 1		supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.	
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ADDITIONAL INVENTOR(S)

Supplemental Sheet

Page 1 of 1

DECLARATION**Name of Additional Joint Inventor, if any:** A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))

Family Name or Surname

Dennis

Sisman

Inventor's Signature

Date

10/9/03

Residence: City

Woodland Hills

California
StateUnited States
Country

Citizenship

Mailing Address

23122 Calvert Street

Mailing Address

23122 Calvert Street

City

Woodland Hills

California
State91367
ZipUnited States
Country**Name of Additional Joint Inventor, if any:** A petition has been filed for this unsigned inventor

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Date

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**DECLARATION FOR UTILITY OR
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(37 CFR 1.63)**

Declaration Submitted With Initial Filing

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Declaration Submitted after Initial Filing (surcharge (37 CFR 1.18 (e)) required)

Attorney Docket Number 58027-014000

First Named Inventor Judy Dering

COMPLETE IF KNOWN

Application Number

Filing Date

Art Unit

Examiner Name

I hereby declare that:

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Fax

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NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Family Name or Surname
Judy	Dering

Inventor's Signature	Date
----------------------	------

Residence: City Westlake Village	State California	Country United States	Citizenship
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Mailing Address
841 Rim Crest Circle

City Westlake Village	State California	ZIP 91361	Country United States
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NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Family Name or Surname
Cindy A.	Wilson

Inventor's Signature <i>Andey A. Wilson</i>	Date 10.9.03
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Residence: City Santa Monica	State California	Country United States	Citizenship US
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Mailing Address
1118 Tenth Street, Apartment 3

City Santa Monica	State California	ZIP 90403	Country United States
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Given Name (first and middle (if any))		Family Name or Surname	
Dennis		Slamon	
Inventor's Signature		Date	
Residence: City	State	United States Country	Citizenship
Woodland Hills	California	United States	
23122 Calvert Street			
Mailing Address			
23122 Calvert Street			
Mailing Address			
City	State	Zip	United States Country
Woodland Hills	California	91387	United States
			Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country
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